PTO/SB/06 (08-03)

Approved for use through 7/31/2008, OMB 0651-0032

U.S. Patient and Trademark Office; U.S. DEPARTMENT OF COMMERCE to a collection of information unitsee.

Und	PATE	Reduction Act of NT APPLICA	ATION	FEE DETER	MINATIO	NECORD	ornson uns	Applicati	9/782	169
CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY								QR.	OTHER THAN SMALL ENTITY	
FOR MUNBER FILED			NUMBE	R EXTRA	RATE	FEE		RATE	FEE	
BASIC FEE (37 CFR 1.18(e))					1	OR		1		
	L CLAIMS FR 1.15(c))	39	39 minus 20 =		· 19			QR	x 8=	
	PENDENT CLAIM: FR 1.16(b))	5 4	minus 3 •		. 2		<u> </u>	OR	X 6	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(d))						٠, ٧.		OR	+8=	_
* If the difference in column 1 is tase than zero, enter "O" in column 2.						TOTAL		OR	TOTAL	
	CI	AIMS AS AME	NDED -	- PART II				_		
(Column 1) (Column 2) (Column 3)					SMALL	ENTITY	OR	OTHER SMALL		
NT A	3/2/5	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADOI- TIONAL FEE		RATE	ADOI- TIONAL FEE
Ž	Total (37 CFR 1.16(4))	27	Minus	- 39	•	X 8 e		OR.	x \$=	
AMENDMENT	Endependent (37 CFR 1.15(10)	. 5	Minus			x \$		OR	x s •	
₹	FIRST PRESENTA	ATION OF MULTIPUS	DEPENDE	NT CLASH (37 CF	R L16(0)	+5		OR	+5 -	
						TOTAL ADD'L FEE		OR	TOTAL ADO'L FEE	
1	0-20-0	(Column 1)		(Cotumn 2)	(Column 3)			_		
ENT 8		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ME	Total gr cs 1.10(c)	23	Minus	<i>" 3</i> 9		X 8=		OR	x 8o	
ENDM	Independent g/ GFR 1,1800)	. 5	Minus	5	. /	x s		OR	x 8•	
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+50		OR	+ 5=	
2 ~						TOTAL ADD'L FEE		]	TOTAL ADD'L FEE	
1	MOT	(Column 1)		(Column 2)	(Column 3)			<b>-</b> \		
NTC	6-7-06	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADOI- TIONAL FEE	] \	RATE	ADDI- TIONAL FEE
ME	Total profit light)	.39	Minus	<i>"39</i>	-/	×e_		_ OR	x 3	
MENDM	Independent (IT OFR 1.14(M)	. 5	Nime	··· 5	• /	X 8		] or	x s	
¥	PIRST PRESENT	ATION OF MULTIPL	E DEPEND	ENT CLAIM (37 C	FR 1.18(0))	+1		OR	+ 4	\
Г						TOTAL ADD'L FEE	1	OR.	TOTAL ADD'L FEE	
	" If the "Highest	otumn 1 is less the Number Previous Number Previous	y Paid For	' in this space	is less than 20	), enter 70°.				

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If the "Highest Number Proviously, Paid For" in 1915 SPALE is less than 3, error" The "Highest Number Proviously, Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application, Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Then will vary depending upon the Individual case. Any comments on the smount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief thromation Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Palante, P.O. Box 1450, Alexandria, VA 22313-1450.